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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	0039-7661-2SRD
	First Inventor or Application Identifier	Mitsunobu YOSHIDA
	Title	DISPLAY DEVICE AND DISPLAY METHOD

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification Total Pages 71 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 11 4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 2 a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 15 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference (usable if box 4B is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	ACCOMPANYING APPLICATION PARTS 6. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 8. <input type="checkbox"/> English Translation Document (if applicable) 9. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (3) 10. <input type="checkbox"/> Preliminary Amendment 11. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 12. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application. Status still proper and desired. 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. <input checked="" type="checkbox"/> Other: Notice of Priority, Statement of Relevancy
15. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit:	
16. Amend the specification by inserting before the first line the sentence: <input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed	
17. CORRESPONDENCE ADDRESS OBLON, SPIVAK, MCCLELLAND, MAIER & NEUSTADT, P.C. FOURTH FLOOR 1755 JEFFERSON DAVIS HIGHWAY ARLINGTON, VIRGINIA 22202 (703) 413-3000 FACSIMILE: (703) 413-2220	

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Docket No. 0039-7661-OSRD

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Mitsunobu YOSHIDA

SERIAL NO: New Application

FILING DATE: Herewith

FOR: DISPLAY DEVICE AND DISPLAY METHOD

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	52 - 20 =	32	× \$18 =	\$576.00
INDEPENDENT CLAIMS	12 - 3 =	9	× \$78 =	\$702.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$260 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$690.00
TOTAL OF ABOVE CALCULATIONS				\$1,968.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input checked="" type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$40.00
TOTAL				\$2,008.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$2,008.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
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